

The City of Rochester welcomes you as an applicant. It is the policy of the City of Rochester to provide equal opportunity to all employees and applicants. The City of Rochester is an Equal Opportunity Employer. As a result, all applicants are considered, all advancements are made and all facilities used by all employees are available without regard to age, race, color, creed, religion, national origin, sex, disability, marital status, sexual orientation, status with regard to public assistance, membership or activity in a local commission. The City of Rochester believes in and follows the principle of nondiscrimination in employment and intends to comply with all federal and state laws.

Upon request, accommodations will be provided to applicants in accordance with American with Disabilities Act (ADA). Please call 507-328-2555.

GENERAL INSTRUCTIONS FOR COMPLETING APPLICATION

- 1. Read the job announcement carefully to be sure that you meet all requirements.
- 2. Fill out a <u>separate application</u> form for each position you are applying for, unless otherwise directed by the job announcement. Be sure to read the application form carefully and completely and sign your name in the appropriate places.
- 3. Be specific and complete when filling out the "Employment History" section. Applications that are incomplete may lose credit or be completely removed from further consideration. If additional space is needed to complete your employment history, extra sheets are available from the City of Rochester Human Resources Department.
- 4. Applications are accepted only for the job posted and must be postmarked by the closing date.
- 5. Please <u>print</u> clearly with ink or type.

1	TYPE OF	APPLICATION
		Open Competitive
		Promotional

2 TENNESSEN WARNING.

In accordance with the Minnesota Government Data Practices Act, the City of Rochester is required to inform you of your rights as they relate to the private information collected from you. Minnesota Statutes 13.04 and 13.43 are two sections that govern what affects you as an applicant for employment with the City of Rochester. Private data is information which is available to you, but not to the public. The personal information we collect about you is private. All data collected is considered private except for the following:

- 1. Your veteran's status
- 2. Relevant test scores
- 3. Your rank on our eligibility list
- 4. Your job history
- 5. Your education and training
- 6. Your work availability

Initially, your name is considered private information. However, if you are selected to be interviewed as a finalist, your name becomes public information.

The data supplied by you may be used for such purposes as may be determined to be necessary in the administration of policies, rules and regulations of the City of Rochester. Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability data is voluntary, but refusal to supply other requested information may mean that your application for employment may not be considered.

Private data is available only to you, to appropriate City employees, and others as provided by state and federal law who have a bona fide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment which is not designated in this notice as private data.

Except for race, sex, age and disability data, the information you give us about yourself is needed to identify you and to assist the City of Rochester Human Resources Department in determining your suitability for the position for which you are applying. Race, sex, age and disability data are used in summary form by the City to monitor protected class employment and to meet federal, state and local reporting requirements.

I declare that I have read and understand the information given above regarding the Minnesota Government Data Practices Act.

APPLICANT SIGNATURE	

OSITION APPLYING	FOR			SALA	RY :	EXP	PEC	TED	
ast Nama	First			Middle					
	First			Midale	:				
·							-		
ome Phone ()	Bus. Phone ()	Em	ail					
	ON								
	aining is required for the position this application form.	tion you are a	applying for, you r	nust i	nclud	le yo	our t	ranscript	(s) (an
Educational Institution	Name and Address of Institution		Course of Stud (Major/Minor)		Circle Ye Com	ear		Did you Graduate?	Diploma or Degree Awarded
High School				1	2	3	4		
College				1	2	3	4		
College				1	2	3	4		
Other (specify)				6 mos	9 mos	1 yr	2 yrs		
	LICENSE (Please								
								3, C, or I	
	ICENSES								
lease list any other licenthis licensing, etc. is repplication may be remo	uses, registrations or certification equired for the position, and y ved from further consideration or may include a photocopy of	you fail to inc n for the posi	clude a photocopy ition. If this licensi	of it v	with not r	your equi	r ap	plication	form, yo
License or Certi	ficate Licensi	ng Agency	Expiration Date			Licen	ıse N	umber	
	neute Election								



EMPLOYMENT HISTORY INSTRUCTIONS.

The City of Rochester uses a 100-point rating system to assign value to education and experience that relate most closely to the duties and responsibilities of the position being ranked. The experience and education you document on this application form may be used as the primary source of information for determining your competitive score using the experience and education value system developed for the position for which you are applying. Applicants with the highest number of total ranking points will be interviewed for the position.

In order to receive accurate credit for the knowledge and skills you have acquired, it is absolutely necessary that you are specific when describing these credentials. When completing this application form, **do not use a single general statement to describe the duties you have performed**. List each major duty performed for each position held within the past five years. When describing your experience, list each job responsibility separately and be specific. **Never** describe your job duties with a single statement such as "performed general clerical work" or "operated heavy equipment."

Please be very specific in stating the dates of employment and whether it was full-time or part-time employment for each job experience you are documenting. Without this information we will be unable to accurately rate your experience.

In the process of rating individuals for a position, the City of Rochester only ranks job experiences acquired within the last five years. When completing the "Length of Employment" sections of this application form use the "Current Experience" box for all job experiences that occurred within the past 5 yrs. Experiences beyond the last five years need only be included if you are using these experiences to demonstrate that you meet the minimum requirements for a job. Use the "Previous Experience" box if you need to include experiences greater than 5 yrs. ago to document that you meet the minimum requirements for a job. Internships, volunteer or other unpaid experiences should all be included in the "Employment History" section of the application form.

Please provide accurate and complete employment information. List your present or most recent experience first. Additional employment history sheets are available in the Human Resources Department if you need extra space to list your job experiences.

DO NOT MARK YOUR APPLICATION "PLEASE SEE RESUME"

PRESENT EMPLOYER	Length of Employment:
Employer:Address:	completed within the last five years or for that portion of the
Business Phone: ()	From: To: FULL TIME □ PART TIME □
Fax: ()	PREVIOUS EXPERIENCE (Greater than 5 yrs. ago)
Email:	Complete the shaded area below <u>only</u> if you have not documented sufficient experience within the last 5 yrs. to meet
Supervisor's name & title:	the minimum requirements for the job you are applying for. You only need to provide the City of Rochester with enough employment history (beyond the last 5 yrs.) to show that you
Your title:	
Number and types of positions you supervised:	Please indicate the # of years & months only (Do not give specific dates) FULL TIME PART TIME
Reason for leaving:	Years Months
Principal responsibilities (be complete):	

☐ Yes

□ No

May we contact this employer regarding your work record?

PREVIOUS HISTORY (continued)

May we contact this employer regarding your work record?

PREVIOUS EMPLOYER	_ Length of Employment:
Employer:	CURRENT EXPERIENCE (Within last 5 yrs.)
Address:	completed within the last five years or for that portion of the
Business Phone: ()	From: To: FULL TIME ¬ PART TIME ¬
Fax: ()	PREVIOUS EXPERIENCE (Greater than 5 yrs. ago)
Email:	Complete the shaded area below <u>only</u> if you have not documented sufficient experience within the last 5 yrs. to meet
Supervisor's name & title:	the minimum requirements for the job you are applying for. You only need to provide the City of Rochester with enough
Your title:	employment history (beyond the last 5 yrs.) to show that you do meet the minimum requirements for this position.
Number and types of positions you supervised:	Please indicate the # of years & months only (Do not give specific dates) FULL TIME PART TIME
Reason for leaving:	Years Months
Principal responsibilities (be complete):	
May we contact this employer regarding your work record? PREVIOUS EMPLOYER	_ Length of Employment:
Employer:	CURRENT EXPERIENCE (Within last 5 yrs.) — Complete the boxed-in area below only if an experience was
Address:	completed within the last five years or for that portion of the
Business Phone: ()	
Fax: ()	PREVIOUS EXPERIENCE (Greater than 5 yrs. ago)
Email:	 Complete the shaded area below <u>only</u> if you have not documented sufficient experience within the last 5 yrs. to meet
Supervisor's name & title:	
Your title:	employment history (beyond the last 5 yrs.) to show that you do meet the minimum requirements for this position.
Number and types of positions you supervised:	Please indicate the # of years & months only (Do not give specific dates) FULL TIME PART TIME PART TIME
	Years Months
Reason for leaving:	
Principal responsibilities (be complete):	

☐ Yes

☐ No

PREVIOUS HISTORY (continued)

PREVIOUS EMPLOYER	Length of Employment:
Employer:	<u>CURRENT EXPERIENCE</u> (Within last 5 yrs.) Complete the boxed-in area below only if an experience was
Address:	completed within the last five years or for that portion of the
Business Phone: ()	From: To: FULL TIME ¬ PART TIME ¬
Fax: ()	· · · · · · · · · · · · · · · · · · ·
Email:	Complete the shaded once below only if you have not
Supervisor's name & title:	the minimum requirements for the job you are applying for. You only need to provide the City of Rochester with enough
Your title:	employment history (beyond the last 5 yrs.) to show that you do meet the minimum requirements for this position.
Number and types of positions you supervised:	Please indicate the # of years & months only (Do not give specific dates) FULL TIME PART TIME
Reason for leaving:	Years Months
Principal responsibilities (be complete):	
May we contact this employer regarding your work record?	□ Yes □ No
REFERENCES	AddressEmail
Name	Address
Home Phone	
Work Phone	Email
FAX	Occupation
Name	Address
Home Phone	
Work Phone	Email
FAX	Occupation
List City of Rochester employees with whom you are acquair	nted.
Name	Occupation
Name	Occupation



VETERAN'S PREFERENCE POINTS APPLICATION INSTRUCTIONS

Preference points are awarded to qualified veterans and spouses of deceased or disabled veterans to add to their exam points. Points are awarded subject to the provisions of Minnesota Statutes 43A.11. To be eligible for veteran's preference points you must:

- 1. Be separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days or by reason of disability incurred while serving on active duty, and be a citizen of the United States or resident alien; or be the surviving spouse of a deceased veteran (as defined above) or the spouse of a disabled veteran who because of the disability is not able to qualify; AND
- 2. NOT be currently receiving or eligible to receive a monthly veteran's pension based exclusively on length of military service.

The information you provide on this form will be used to determine your eligibility for veteran's preference points. You are not required to supply this information, but we cannot award veteran's points without it.

YOU MUST SUPPLY A COPY OF YOUR DD214. DISABLED VETERANS MUST ALSO SUPPLY FORM FL-802 OR AN EQUIVALENT LETTER FROM A SERVICE RETIREMENT BOARD. SPOUSE APPLYING FOR PREFERENCE POINTS MUST SUPPLY THEIR MARRIAGE CERTIFICATE. THE VETERAN'S DD214 AND FL-802 OR DEATH CERTIFICATE.

If you supply the supporting documentation by separate mail, your name and the position applied for must be included.

ARE YOU APPLYING FOR VETERAN'S BONUS POINTS? ☐ YES ☐ NO

If you answered "yes," your DD214 or other documentation must be received no later than seven (7) calendar days after the application deadline for the position.

VETERAN'S PREFERENCE POINTS APPLICATION

Veteran	If spouse, veteran's na	me:	
□ Self □ Spouse			
Branch of Service:	Period of Active Duty		
	From: To:		
Rank at Discharge:	Type of Discharge:	Date of Final Discharge	Service No.:
Are you receiving or eligible for a militar pension? Yes No	y	Do you have a compensable disability? ☐ Yes ☐ No	service-related
Preference Requested: Veteran	☐ Disa	abled Veteran	
☐ Spouse of Di	sabled Veteran 📮 Spo	ouse of Deceased Veteran	
Your Preference Points application cannot documentation is not attached, it must be deadline for the position in order to guarantees.	oe received in our office	e no later than seven (7) calend	
Supporting documentation: \Box is attach	ed 🖵 will be submitted	within seven (7) days of applica	ation deadline
SIGNATURE		DATE	

CITY OF ROCHESTER - HUMAN RESOURCES DEPARTMENT ROOM 295 - CITY HALL - 201 4TH ST SE ROCHESTER, MN 55904 507/328-2555

FOR OFFICE USE ONLY 5 POINTS □

10 POINTS □

10 HAVE YOU . . . ___

- 1 Thoroughly read this entire application with special attention to the Tennessen Warning on the first page?
- 2. Signed this application in all required places: (a) the Tennessen Warning on the first page; (b) the Employee Certification; (c) and the Claim for Veteran's Preference? This application will not be accepted without all necessary signatures.
- 3. Provided sufficient information so that proper credit for education and experience is given?
- 4. Completed the claim for Veteran's Preference if applicable to you? Also, a copy of your DD Form 214 is to be attached to the Claim Form at the time of application to determine your eligibility for points.
- 5. Included copies of required licensing?

Please return completed application form to:

City of Rochester Human Resources Department 201 4th Street SE, Room 295 Rochester, MN 55904 Telephone Number (507) 328-2555 FAX Number (507) 328-2565 Tri-Government Jobline (507) 328-5627 Email Address humanresources@rochestermn.gov



EMPLOYEE CERTIFICATION _____

Before signing this application, read the following waiver carefully.

- 1. I have read and understand the job announcement for the position for which I am applying and certify that the information provided in this application is true and complete to the best of my knowledge.
- 2. I authorize all current and previous employers to release job-related information upon the written request of the City of Rochester Human Resources Department. However, I understand that if, in the Employment History section, I have answered "No" to the question "May we contact this employer?", contact with the employer will not be made without my specific authorization.
- 3. I authorize the City of Rochester Human Resources Department to verify all information on this application to determine whether or not I am qualified for the position for which I am applying.
- 4. I understand that providing false information on this application may result in dismissal from any position gained on the basis of that false information.
- 5. I understand that this application is not a contract of employment.

Printed Name

Signature Date Signed

ENT USE ONLY	
INTERVIEWED BY:	
_	





The City of Rochester needs your cooperation in the completion of this form. It will enable the city to report accurate information to both the State and Federal Governments.

Equal Employment Opportunity Applicant Information

Providing the following information is entirely <u>VOLUNTARY</u>. This information will be used for reporting purposes in compliance with EEO/AA laws and to determine the effectiveness of recruitment efforts and the validation of selection methods. You are not legally required to provide this information. If you do not, the information contained in our reports will be less complete. This information will remain separate from your application and will be held strictly confidential.

POSITION Applying for:

the appropriate category:	HOW DID YOU LEARN ABOUT THE POSITION?
ER:	Rochester Post-Bulletin
	Minneapolis Star Tribune
Male	MN Workforce Center
Female	Job Fair
/ETHNIC GROUP:	League of MN Cities/Cities Bulletin
American Indian/Alaskan	Tri-Government Jobline
Asian/Pacific Islander	Nation's Cities Weekly
Black/African-American	Public Sector Job Bulletin
Hispanic	Posted Announcement
White	City Employee
Other	Walk-In
Onlei	Internet (website):
	Other (specify):